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Suzanne Steab - Horizon Mine Updated Insurance Certificate

From: "Kit Pappas" <kit@emerytelcom.net>
To: "Karl Houskeeper" <KARLHOUSKEEPER@utah.gov>, "Daron Haddock" <daronhaddo...>
Date: 6/3/2010 1:40 PM
Subject: Horizon Mine Updated Insurance Certificate
Attachments: Horizon Updated Insurance Certificate 6-4-10.pdf

Attached, please find the updated Insurance Certificate for the Horizon Mine. Please feel free to contact me if you have any questions or comment.

Thank you,
John C. (Kit) Pappas
America West Resources
Manager of Engineering &
Environmental Services
3266 South 125 West
Price, Utah 84501
Phone: 435-636-0820
Fax: 435-636-0817

ACORD CERTIFICATE OF LIABILITY INSURANCEOP ID GT
AMER-30DATE (MM/DD/YYYY)
06/03/10

PRODUCER
NFP Property & Casualty
Services, Inc.
707 Westchester Ave., Ste 201
White Plains NY 10604
Phone: 914-683-3990 Fax: 914-948-9560

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION
ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE
HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR
ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED

Hidden Splendor Resources Inc
America West Resources Inc
3266 So. 125 West
Price UT 84501

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: Arch Specialty Ins. Co.

INSURER B: Rockwood Casualty Ins. Co.

INSURER C:

INSURER D:

INSURER E:

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING
ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR
MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH
POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	CSPKG0052800	06/04/10	06/04/11	EACH OCCURRENCE \$ 1000000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100000
A	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	CSPKG0052800	06/04/10	06/04/11	MED EXP (Any one person) \$ 5000
	<input checked="" type="checkbox"/> Blasting				PERSONAL & ADV INJURY \$ 1000000
	GEN'L AGGREGATE LIMIT APPLIES PER:				GENERAL AGGREGATE \$ 2000000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				PRODUCTS - COMP/OP AGG \$ 1000000
A	AUTOMOBILE LIABILITY	CSPKG0052800	06/04/10	06/04/11	COMBINED SINGLE LIMIT (Ea accident) \$ 1000000
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input checked="" type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS				
	<input type="checkbox"/> NON-OWNED AUTOS				
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC \$
					AUTO ONLY: AGG \$
A	EXCESS/UMBRELLA LIABILITY	CSUMB00528-01	06/04/10	06/04/11	EACH OCCURRENCE \$ 5000000
	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$ 5000000
	<input type="checkbox"/> DEDUCTIBLE				\$
	<input checked="" type="checkbox"/> RETENTION \$10000				\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WC455513	09/30/09	09/30/10	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT \$ 1000000
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE \$ 1000000
	OTHER				E.L. DISEASE - POLICY LIMIT \$ 1000000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

Utah Division of Oil, Gas and Mining is included as Additional Insured with respects to General Liability

CERTIFICATE HOLDER

Utah Division of Oil, Gas
and Mining
1594 W North Temple
Ste 1210
Salt Lake City UT 84114-5801

UTARD01

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION
DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN
NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL
IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR
REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE